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21 February 1963

MEMORANDUM FOR: Deputy Chief, Medical Staff
Chief, Operations Division
Chief, Psychiatric Staff
Chief, Clinical Division
Chief, Support Division
Chief, Assessment and Evaluation Staff

SUBJECT : Integration of Information Influencing Personnel Actions

REFERENCE : Memorandum from DD/S, dated 13 December 1962, Subject as Above

1. The referenced memorandum provides for the formal establishment of an arrangement already in existence whereby significant information or the knowledge of the existence of significant information is conveyed to the Director of Personnel. The purpose of the formal arrangement is to ensure that the Medical Staff is consulted whenever personnel actions involve cases of medical significance.

2. The establishment of this more formal system is to be considered as an adjunct to existing systems and not a substitute. Present processing and reporting procedures will remain in effect and as established.

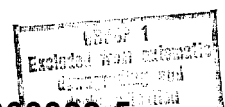
3. Consistent with the purpose of the new system, it is the responsibility of the Medical Staff to identify those cases and that information which should be brought to the attention of the Director of Personnel. While a great deal of individual judgment is necessary in accomplishing this responsibility, attention should be directed particularly to those cases involving the probability of disciplinary action, unfavorable publicity or embarrassment to the Agency.

4. As a guide in application of these criteria, it should be recognized that duplication of existing procedures should be avoided and that no voluminous transfer of information is anticipated or desired. It is estimated that it will take several years for the identification process to achieve its purpose and that the final total number of cases, including medical, will not exceed 1 per cent.

5. Although the process of identification is on an "Eyes Only" basis, medical information is best conveyed in terms of administrative interpretation. In those cases where medical information or implication is particularly sensitive, it is preferable to merely alert the Director of Personnel to such incidence. It is not the intent of this system to create a new medical file containing a great deal of sensitive information.

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6. The Chief, Psychiatric Staff, the Chief, Clinical Division, and the Chief, Assessment and Evaluation Staff, will be responsible for recommending to the Chief, Medical Staff, those cases requiring identification in accordance with the purpose of the system. It is suggested that the system be initiated by relying on experience to identify cases for immediate consideration; and then, on a continuing basis, to identify those cases that arise as a result of regular procedure and processing.

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Chief, Medical Staff

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